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Fill in this information to identify ye		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this amended filin

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. 2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and "doing business as" names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
DeAndrea	
First Name	First Name
Ann	
Middle Name	Middle Name
Anderson	
Last Name	Last Name
Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
DeAndrea	
First Name	First Name
Middle Name	Middle Name
Blackwell	
Last Name	Last Name
DeAndrea	
First Name	First Name
Middle Name	Middle Name
Watson	
Last Name	Last Name
Business name (if applicable)	Business name (if applicable)
Business name (if applicable)	Business name (if applicable)

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Debtor 1 DeAndrea Ann An		derson	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
3.	Only the last 4 digits of your Social Security	xxx - xx - 0 9 0 5	xxx - xx			
	number or federal	OR	OR			
	Individual Taxpayer Identification number (ITIN)	9xx - xx	9xx - xx			
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN			
		EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		6653 McKinney Ranch Pkwy Number Street	Number Street			
		Apt 8311	_			
		-				
		McKinney TX 75070 City State ZIP Code	City State ZIP Code			
		Collin				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number Street	Number Street			
		P.O. Box	P.O. Box			
		City State ZIP Code	City State ZIP Code			
			,			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		✓ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
		Venue is convenient				
Ŀ	Part 2: Tell the Court A	about Your Bankruptcy Case				
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.			
	are choosing to file under	✓ Chapter 7				
		Chapter 11				
		Chapter 12				
		Chapter 13				

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Deb	tor 1 DeAn	drea Ann An	derson		Case number (if know	n)			
8.	How you will pay the fee		— co	ill pay the entire fee when I file my petition. Please check with the clerk's office in your local art for more details about how you may pay. Typically, if you are paying the fee yourself, you may with cash, cashier's check, or money order. If your attorney is submitting your payment on your half, your attorney may pay with a credit card or check with a pre-printed address.					
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).					
			B: th fe	request that my fee be waived (Yo y law, a judge may, but is not require nan 150% of the official poverty line to be in installments). If you choose this iling Fee Waived (Official Form 1038)	ed to, waive your fee, and may that applies to your family size s option, you must fill out the a	do so only if your income is less and you are unable to pay the			
9.	Have you filed		☑ N	lo					
	bankruptcy within the last 8 years?	thin the	□ Y	es.					
		Distr	District	t	When MM / DD / YY	Case number			
			District	t	When	Case number			
			District	t		Case number			
10.	-	e any bankruptcy	☑ N	o					
	cases pending filed by a spou	•	□ Y	es.					
	not filing this o		Debtor	-	Relatio	nship to you			
	partner, or by		District	t	When	Case number,			
	affiliate?				MM / DD / YY	YY if known			
			Debtor	-	Relatio	nship to you			
			District	t	When	Case number,			
					MM / DD / YY	YY if known			
11.	Do you rent yo residence?	our		o. Go to line 12. es. Has your landlord obtained an	eviction judgment against you	?			
		_		No. Go to line 12. Yes. Fill out Initial Statem and file it as part of this ba	ent About an Eviction Judgmeankruptcy petition.	ent Against You (Form 101A)			

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Deb	tor 1 DeAndrea Ann Ande	ersor	n		Case number (if known) _		
Pa	art 3: Report About An	іу Ві	usine	sses You Own as	a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	pusiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busi Single Asset Rea Stockbroker (as of	ness (as defined in 11 U.S.C. § al Estate (as defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10	101(27A)) C. § 101(51B	ZIP Cod	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small	choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicated are a small business debtor or you are choosing to proceed under Subchapter V, you must attain most recent balance sheet, statement of operations, cash-flow statement, and federal income to or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filling under Chapter 11.				indicate that you ust attach your come tax return		
	business debtor, see 11 U.S.C. § 101(51D).		Yes.		iter 11, I am a small business de		-	
			Yes.	•	ter 11, I am a debtor according I I choose to proceed under Sub		•	` '
Pa	Report If You Ow	vn o	r Hav	e Any Hazardous I	Property or Any Property	y That Ne	eds Imm	ediate Attention
 4 .	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZID Code
					City		State	ZIP Code

Debtor 1	DeAndrea Ann Anderson	Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:				
☐ Incapacity.	I have a mental illness or a men			

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 DeAndrea Ann Ande		erson	rson Case number (if known)				n)			
Р	art 6:	Answer These C	Quest	stions for Reporting Purposes						
16. What I have?		nd of debts do you	16a		dual p	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."		
			16b.	•	oxdot					
			16c.	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.		
17.	17. Are you filing under Chapter 7?			No. I am not filing unde	r Chap	oter 7. Go to line 18.				
	any exe exclude adminis are paid available	estimate that after mpt property is and strative expenses I that funds will be e for distribution cured creditors?			•	•	-	xempt property is excluded and to distribute to unsecured creditors?		
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
19.		uch do you e your assets to h?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

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Debtor 1	DeAndrea Ann Ar	derson	Case number (if known)				
Part 7:	Sign Below						
For you	_	I have examined this petition, and I and correct.	declare under penalty of pe	rjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		-	can result in fines up to \$25	obtaining money or property by fraud in 0,000, or imprisonment for up to 20 years,			
		X /s/ DeAndrea Ann Anderson DeAndrea Ann Anderson, Debto	<u> </u>	gnature of Debtor 2			
		Executed on 03/29/2023 MM / DD / YYYY	Ex	ecuted on			

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Debtor 1 DeAndrea Ann A	nderson	Case number (if know	n)			
For your attorney, if you are represented by one fyou are not represented by an attorney, you do not need to file this page.	eligibility to proceed under Chapter 7, 11, 12, or relief available under each chapter for which the debtor(s) the notice required by 11 U.S.C.	named in this petition, declare that I have informed the debtor(s) about opter 7, 11, 12, or 13 of title 11, United States Code, and have explained the pter for which the person is eligible. I also certify that I have delivered to d by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, e after an inquiry that the information in the schedules filed with the petition				
	X /s/ Mark S Rubin/Stacey D'Lizarraga Signature of Attorney for Debtor	Date	03/29/2023 MM / DD / YYYY			
	Mark S Rubin/Stacey D'Lizarraga					
	Printed name Rubin & Associates PC					
	Firm Name 13601 Preston Rd					
	Number Street Suite 500E					
	Dallas	TX	75240			
	City	State	ZIP Code			
	Contact phone (214) 760-7777	Email address				
	17361550/15541		_			
	Bar number	State				

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

In re DeAndrea Ann Anderson	Case No
	Chapter 7
DISCLOSURE OF COMP	ENSATION OF ATTORNEY FOR DEBTOR
that compensation paid to me within one year bef	. 2016(b), I certify that I am the attorney for the above named debtor(s) and one the filing of the petition in bankruptcy, or agreed to be paid to me, for the debtor(s) in contemplation of or in connection with the bankruptcy case
For legal services, I have agreed to accept	\$2,250.00
Prior to the filing of this statement I have received	\$2,250.00
Balance Due	\$0.00
2. The source of the compensation paid to me was: Debtor Other (spe	cify)
3. The source of compensation to be paid to me is:	
☑ Debtor ☐ Other (spe	cify)
4. I have not agreed to share the above-disclos associates of my law firm.	ed compensation with any other person unless they are members and
	ompensation with another person or persons who are not members or ement, together with a list of the names of the people sharing in the
5. In return for the above-disclosed fee, I have agree	d to render legal service for all aspects of the bankruptcy case, including:
 a. Analysis of the debtor's financial situation, and bankruptcy; 	rendering advice to the debtor in determining whether to file a petition in
b. Preparation and filing of any petition, schedule	s, statements of affairs and plan which may be required;
c. Representation of the debtor at the meeting of	creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/29/2023 /s/ Mark S Rubin/Stacey D'Lizarraga

Date Mark S Rubin/Stacey D'Lizarraga

Rubin & Associates PC
13601 Preston Rd
Suite 500E

Dallas TX 75240

Phone: (214) 760-7777 / Fax: (214) 760-9100

Bar No. 17361550/15541

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Fill in this info	ormation to id	dentify you	ır case an	d this filing:						
Debtor 1	DeAndrea	Ann		Anderson						
Bostor :	First Name	Middle Na	ame	Last Name						
Debtor 2										
(Spouse, if filing)	First Name	Middle Na	ame	Last Name						
United States Bar	nkruptcy Court for	the: NORTH	HERN DIST	RICT OF TEXAS						
Case number						□ Check	if this is an			
(if known)					'		led filing			
055 : 15	4004/5									
Official Form										
Schedule A/	B: Property	<u>/</u>						12/15		
filing together, bot sheet to this form.	th are equally re On the top of a	sponsible for ny additional	r supplying I pages, wri	s complete and accurate a correct information. If mo te your name and case nu Land, or Other Real I	re space is needed nber (if known). A	l, attach a s nswer eve	separate ry questio			
		,								
1. Do you own o	or have any legal	or equitable	interest in	any residence, building, la	nd, or similar prop	erty?				
☑ No. Go to										
Yes. Wh	ere is the propert	y'?								
	-	-	-	our entries from Part 1, in that number here		→		\$0.00		
Part 2: Des	scribe Your V	ehicles				•				
-		•		ny vehicles, whether they a o report it on Schedule G: Ex	-		-			
3. Cars, vans, tr	rucks, tractors, s	port utility ve	ehicles, mot	orcycles						
□ No										
√ Yes 3.1.		14	Vho haa an i	nterest in the property?	Do not deduct s	coured alai	ma or oven	antions Dut the		
Make:	Jeep		theck one.	interest in the property:	amount of any s					
Model:	Cherokee		Debtor 1	only	Creditors Who F	Creditors Who Have Claims Secured by Property.				
Year:	2015		Debtor 2	•	Current value o			alue of the		
Approximate mileag		[_	and Debtor 2 only ne of the debtors and anoth	entire property		portion y			
Other information:	<u>, , , , , , , , , , , , , , , , , , , </u>		_ Actiedasi C	ne of the deptors and anoth	⁼¹	5,388.00		\$15,388.00		
2015 Jeep Chero miles)	okee (approx. 9	9,000 [Check if (see instr	this is community propert	′					
3.2.		W	Vho has an	nterest in the property?	Do not deduct s	ecured clai	ms or exen	nptions. Put the		
Make:	Mitsubishi	C	heck one.		amount of any s					
Model:	Outlander	<u>_</u>	Debtor 1	•	Creditors Who F					
Year:	2012	[Debtor 2 Debtor 1	only and Debtor 2 only	Current value of entire property		Current v	value of the rou own?		
Approximate mileaç	ge: 116,000	<u> </u>		ne of the debtors and anoth		,565.00	, ,	\$19,565.00		
Other information:			_			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	+ 10,00000		
2012 Mitsubishi 116,000 miles)	Outlander (app	orox.	Check if (see instr	this is community propert uctions)	1					

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Deb	otor 1 De	Andrea A	nn Anderson Case number (if known)	
4.			notor homes, ATVs and other recreational vehicles, other vehicles, and accessories ers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.			of the portion you own for all of your entries from Part 2, including any have attached for Part 2. Write that number here	\$34,953.00
Р			Your Personal and Household Items	
Do	you own or	have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		-	d furnishings iances, furniture, linens, china, kitchenware	
		Describe	Household Furnishings	\$1,650.00
7.		Televisions	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; ections; electronic devices including cell phones, cameras, media players, games	
	☐ No ✓ Yes. D	Describe	Electronics	\$550.00
8.		Antiques a	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles	'
	✓ No ☐ Yes. D	Describe		
9.		Sports, pho	and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; d kayaks; carpentry tools; musical instruments	'
	✓ No ☐ Yes. D	Describe		
10.	√ No	Pistols, rifle	es, shotguns, ammunition, and related equipment	
11.	Clothes		clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes. D	Describe	Clothing & Accessories	\$700.00
12.	•	Everyday jo gold, silver	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	•
	_	Describe		

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Deb	tor 1	DeAndrea Ann	Anderson	Case number (if known)	
13.		rm animals les: Dogs, cats, bird	ds, horses		
	✓ No ☐ Yes	s. Describe			
14.	did not		ousehold items you did not alrea	ady list, including any health aids you	-
		s. Give specific]
15.				uding any entries for pages you have	\$2,900.00
Pa	art 4:	Describe You	ır Financial Assets	'	
Doy	ou own	or have any legal	or equitable interest in any of th	e following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	les: Money you hav petition	e in your wallet, in your home, in a	safe deposit box, and on hand when you file your	
	✓ No			Cash:	·
17.	•	-	ses, and other similar institutions.	ertificates of deposit; shares in credit unions, If you have multiple accounts with the same	
	✓ No ☐ Yes	S	Institution name:		
18.			oublicly traded stocks vestment accounts with brokerage	firms, money market accounts	
	✓ No	S	Institution or issuer name:		
19.	-	-	c and interests in incorporated a tnership, and joint venture	nd unincorporated businesses, including	
	info	s. Give specific ormation about m	Name of entity:	% of ownership:	
20.	Negotia	able instruments inc		nd non-negotiable instruments ecks, promissory notes, and money orders. someone by signing or delivering them.	
	✓ No ☐ Yes	s. Give specific ormation about m	Issuer name:		

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Deb	otor 1 DeAndrea Ann	Anderson	Case number (if known)	
21.	Retirement or pension ac Examples: Interests in IRA profit-sharing p	A, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or	
	No ☐ Yes. List each account separately.	Type of account:	Institution name:	
22.		eposits you have ma	ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	s
	✓ No ✓ Yes		Institution name or individual:	
23.	Annuities (A contract for	a specific periodic p	payment of money to you, either for life or for a number of year	rs)
	✓ No Yes	Issuer name and	description:	
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 52		t in a qualified ABLE program, or under a qualified state tu).	ition program.
	✓ No	Institution name a	nd description. Separately file the records of any interests. 1	1 U.S.C. § 521(c)
25.	Trusts, equitable or futur powers exercisable for y		erty (other than anything listed in line 1), and rights or	
	✓ No✓ Yes. Give specific information about then	n		
26.			ets, and other intellectual property; proceeds from royalties and licensing agreements	
	No Yes. Give specific information about then	n		
27.	Licenses, franchises, and Examples: Building permit		angibles s, cooperative association holdings, liquor licenses, profession	nal licenses
	✓ No ✓ Yes. Give specific			
	information about then			
Mor	ney or property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ No ☐ Yes. Give specific info			Federal:
	about them, including you already filed the re	eturns		State:
	and the tax years			Local:

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Deb	btor 1 DeAndrea Ann Anderson	Case number (if known)
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, ma	
	✓ No ✓ Yes. Give specific information	Alimony:
		Maintenance:
		Support:
		Divorce settlement:
		Property settlement:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, s compensation, Social Security benefits; unpaid loans you made to No	
	Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insurance
	✓ No Yes. Name the insurance company of each policy and list its value	Beneficiary: Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance entitled to receive property because someone has died	ce policy, or are currently
	✓ No ☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or m Examples: Accidents, employment disputes, insurance claims, or rights to sur	
	✓ No ☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counrights to set off claims	nterclaims of the debtor and
	✓ No ☐ Yes. Describe each claim	
35.	Any financial assets you did not already list	
	✓ No ✓ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entrie attached for Part 4. Write that number here	
Pa	art 5: Describe Any Business-Related Property You Own or	Have an Interest In. List any real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-relate	ed property?
	✓ No. Go to Part 6.✓ Yes. Go to line 38.	

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Deb	tor 1	DeAndrea Ann Ande	erson	Case number (if known)	
20		4			Current value of the portion you own? Do not deduct secured claims or exemptions.
JO.	Accoun	is receivable or comm	issions you already earned		
	✓ No ☐ Yes	. Describe]
39.	Example	quipment, furnishings es: Business-related condesks, chairs, electr	mputers, software, modems, printers, copiers	, fax machines, rugs, telephones,	
	✓ No ☐ Yes	. Describe]
40.	Machine	ery, fixtures, equipmer	nt, supplies you use in business, and tools	of your trade	
	✓ No ☐ Yes	. Describe]
41.	Invento	ry			
	☑ No	. Describe]
42.	Interest	s in partnerships or jo	int ventures		
	☑ No	, p p 7.			
		. Describe Name of	entity:	% of ownership:	
43.	Custom	er lists, mailing lists, o	or other compilations		
	✓ No ☐ Yes	Do your lists include No Yes. Describe	personally identifiable information (as de	fined in 11 U.S.C. § 101(41A))?]
44.	Any bus	siness-related property	y you did not already list		_
	☑ No	. Give specific informat			
45.			our entries from Part 5, including any entr number here		\$0.00
Pa			n- and Commercial Fishing-Related n interest in farmland, list it in Part 1.	Property You Own or Have a	n Interest In.
46.	Do you	own or have any legal	or equitable interest in any farm- or comm	ercial fishing-related property?	
		Go to Part 7. . Go to line 47.			

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Deb	tor 1	DeAndrea Ann Anderson	Case number (if known)	
47.	Farm a	nimals les: Livestock, poultry, farm-raised fish		Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No ☐ Yes]
48.	Crops-	either growing or harvested		
	_	s. Give specific]
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and to	ols of trade	
	✓ No ☐ Yes	S]
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes	S]
51.	Any far	m- and commercial fishing-related property you did not alread	y list	
		s. Give specific]
52.		e dollar value of all of your entries from Part 6, including any e		\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest	in That You Did Not List Above	,
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership		
	✓ No ☐ Yes	s. Give specific information.		
54.	Add the	e dollar value of all of your entries from Part 7. Write that num	oer here	\$0.00

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Debtor 1	DeAndrea Ann Anderson	Case nu	umber (if known) _			
Part 8:	List the Totals of Each Part of this Form					
55. Part 1	: Total real estate, line 2			. →		\$0.00
56. Part 2	2: Total vehicles, line 5	\$34,953.00				
57. Part 3	3: Total personal and household items, line 15	\$2,900.00				
58. Part 4	l: Total financial assets, line 36	\$0.00				
59. Part 5	5: Total business-related property, line 45	\$0.00				
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00				
61. Part 7	7: Total other property not listed, line 54	+\$0.00				
62. Total	personal property. Add lines 56 through 61	\$37,853.00	Copy personal property total	→ +	<u> </u>	\$37,853.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62.					\$37,853.00

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Debtor 1						
Debior 1	DeAndrea First Name	Ann Middle Nam	Anderson ne Last Name	n		
Debtor 2						
(Spouse, if filing)		Middle Nam		rev A		
	nkruptcy Court for	tne: NORTHE	ERN DISTRICT OF 1	EXA	12	Check if this is an amended filing
Case number (if known)						amended ming
Official Form	106C					
Schedule C	: The Prope	rty You C	laim as Exemp	ot		(
Using the property	you listed on <i>Sch</i> ill out and attach to	edule A/B: Prop o this page as r	perty (Official Form 106	6A/B)	as your source, list th	esponsible for supplying correct informa e property that you claim as exempt. If essary. On the top of any additional pag
s to state a speci exempted up to the eceive certain be exemption of 100	fic dollar amount ne amount of any enefits, and tax-ex % of fair market v	as exempt. A applicable sta cempt retirementalue under a le	Iternatively, you may tutory limit. Some ex ent fundsmay be unl	clair cemp imite mptic	n the full fair market tionssuch as those d in dollar amount. I on to a particular dol	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	erty You Cl	aim as Exempt			
I. Which set of	exemptions are y	ou claiming?	Check one only.	even	if your spouse is filing	with you.
You are	claiming federal ex	xemptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	·
You are For any prop	claiming federal exerty you list on S	xemptions. 11	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exem	11 U.	S.C. § 522(b)(3)	below.
You are 2. For any prop Brief description	claiming federal ex	xemptions. 11 Schedule A/B the and line on	nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U. npt, f	S.C. § 522(b)(3)	·
You are Propagation of the second se	claiming federal exerty you list on S of the property a	xemptions. 11 Schedule A/B the and line on	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exen Current value of the portion you	11 U. npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim	below.
You are Property You are Prief description Schedule A/B that	claiming federal exerty you list on S of the property a	xemptions. 11 Schedule A/B the and line on	hkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for	below. Specific laws that allow exemption
You are Prief description Chedule A/B that Brief description: 2015 Jeep Cher	claiming federal exerty you list on S of the property a	xemptions. 11 chedule A/B the second time on the second ty	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from	11 U. npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market	below.
You are Prief description Chedule A/B that Brief description: Co15 Jeep Cheriniles)	claiming federal exerty you list on S of the property ar t lists this proper	echedule A/B the conditions of the conditions of the condition of the cond	hkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market value, up to any	below. Specific laws that allow exemption
You are Prief description Chedule A/B that Brief description: 2015 Jeep Cherniles) 1st exemption	claiming federal exerty you list on S of the property and the lists this proper okee (approx. 9	echedule A/B the conditions of the conditions of the condition of the cond	hkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market	below. Specific laws that allow exemption
You are Prief description Schedule A/B that Brief description: 2015 Jeep Cherniles) 1st exemption Line from Schedule	claiming federal exerty you list on S of the property and the lists this proper okee (approx. 9	echedule A/B the conditions of the conditions of the condition of the cond	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B \$15,388.00	11 U. npt, f Ame exe Che each	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory limit	below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2)
You are Provided the Area of	claiming federal exerty you list on S of the property and the lists this proper okee (approx. 9	exemptions. 11 Schedule A/B the stand line on ty 19,000 stanset)	hkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B	npt, f Ame	S.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory	below. Specific laws that allow exemption
You are 2. For any prop 3. For any prop 4. For any prop 4. For any prop 5. For any prop 6. For any prop 7. For any prop 7. For any prop 8. For any prop 9. For any pro	claiming federal exerty you list on S of the property ar t lists this proper okee (approx. 9	exemptions. 11 Schedule A/B the shad line on the shad line of the shad lin	nkruptcy exemptions. U.S.C. § 522(b)(2) hat you claim as exer Current value of the portion you own Copy the value from Schedule A/B \$15,388.00	npt, f Ammexe	s.C. § 522(b)(3) ill in the information ount of the mption you claim ck only one box for the exemption \$0.00 100% of fair market value, up to any applicable statutory limit \$0.00	below. Specific laws that allow exemption 11 U.S.C. § 522(d)(2)

☐ Yes

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Debtor 1	DeAndrea Ann Anderson		Case number	r (if known)
Part 2:	Additional Page			
	ription of the property and line on A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
(1st exem	iption: Id Furnishings Inption claimed for this asset) Schedule A/B:6	\$1,650.00	\$1,650.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
(2nd exer	iption: Id Furnishings nption claimed for this asset) Schedule A/B:6	\$1,650.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
-	•	\$550.00	\$550.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
•	•	\$550.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
(1st exem	iption: & Accessories nption claimed for this asset) Schedule A/B:11	\$700.00	\$700.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
(2nd exer	iption: & Accessories nption claimed for this asset) Schedule A/B:11	\$700.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: **DeAndrea Ann Anderson** CASE NO

CHAPTER 7

Scheme Selected: Federal

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Catamani	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
NO.	Category			. ,	•	
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$15,388.00	\$19,898.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,650.00	\$0.00	\$1,650.00	\$1,650.00	\$0.00
7.	Electronics	\$550.00	\$0.00	\$550.00	\$550.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$700.00	\$0.00	\$700.00	\$700.00	\$0.00
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: DeAndrea Ann Anderson CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

TOTALS:

		Gross	Total	Total	Total Amount	Total Amount
No.	Category	Property Value	Encumbrances	Equity	Exempt	Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1 3.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTAL C.	440.000.00	440.000.00	*******	***	

\$18,288.00

\$19,898.00

\$2,900.00

\$2,900.00

\$0.00

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: DeAndrea Ann Anderson CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
Real Property (None)			
Personal Property			
2012 Mitsubishi Outlander (approx. 116,000 miles)	\$19,565.00	\$19,565.00	\$0.00
TOTALS:	\$19,565.00	\$19,565.00	\$0.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

	Property Description	Market Value	Lien	Equity	Non-Exempt Amount	
--	----------------------	--------------	------	--------	-------------------	--

Real Property

(None)

Personal Property

(None)

TOTALS:	\$0.00	\$0.00	\$0.00	\$0.00
IOIALO.				

Summary	
A. Gross Property Value (not including surrendered property)	\$18,288.00
B. Gross Property Value of Surrendered Property	\$19,565.00
C. Total Gross Property Value (A+B)	\$37,853.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$19,898.00
E. Gross Amount of Encumbrances on Surrendered Property	\$19,565.00
F. Total Gross Encumbrances (D+E)	\$39,463.00
G. Total Equity (not including surrendered property) / (A-D)	\$2,900.00
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$2,900.00
J. Total Exemptions Claimed (Wild Card Used: \$0.00, Available: \$15,425.00)	\$2,900.00
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

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Em to detect of						
Debtor 1	ormation to ider DeAndrea First Name	Ann Middle Name	Anderson Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the	e: NORTHERN D	DISTRICT OF TEXAS			
Case number (if known)					Check if this is amended filing	
Official Form	106D					
Schedule D:	: Creditors W	ho Have Cla	ims Secured by	Property		12/15
On the top of any 1. Do any credit □ No. Che □ Yes. Fill	additional pages, w	cured by your pro nit this form to the o	e Additional Page, fill it on the case number (if known operty? Court with your other sche	n).		
claim, list the creditor has a	ed claims. If a credi creditor separately fo particular claim, list to ible, list the claims in the.	or each claim. If m the other creditors	ore than one in Part 2. As	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the	e property that	\$1,074.00	\$300.00	\$774.00
Aarons Inc Creditor's name 111 S Central Ex Number Street	xpwy	furniture	olum.			
McKinney City Who owes the del Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this of to a community	Debtor 2 only the debtors and ano claim relates ty debt	Continge Unliquida Disputed Nature of lie An agree Statutory Judgmer Judgmer Other (in	ated	mortgage or secured	car loan)	
				· · · ·		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,074.00

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Debtor 1	DeAndrea Ann Anderson		_ Case number (if	known)	
Part 1:	Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
		Describe the property that secures the claim: 2012 Mitsubishi Outlander (approx. 116,000 miles)	\$19,565.00	\$19,565.00	
Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Check i		As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, media) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	mortgage or secured	car loan)	
Date debt w	vas incurred	Last 4 digits of account number	5 7 1 9		
Creditor's name		Describe the property that secures the claim: 2015 Jeep Cherokee (approx. 99,000 miles)	\$19,898.00	\$15,388.00	\$4,510.00
Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Deb	2 only 1 and Debtor 2 only one of the debtors and another if this claim relates mmunity debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, media) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	mortgage or secured echanic's lien)	car loan)	
Date debt w	vas incurred <u>1/22/23</u>	Last 4 digits of account number	4 8 6 5		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$39,463.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$40,537.00

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Fill in this inf	ia umatian ta id	landifi	~			
Fill in this int	ormation to it	dentify your ca	se:			
Debtor 1	<u>DeAndrea</u>	Ann	Anderson			
	First Name	Middle Name	Last Name			
Debtor 2	=					
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for	the: NORTHER!	N DISTRICT OF TEXAS			
Case number (if known)				С	Check if this i	
Official Form	106E/F			_		
Schedule E/	F: Creditor	s Who Have	Unsecured Claims			12/15
Do not include any If more space is not to this page. On the space is not to this page.	y creditors with leeded, copy the lihe top of any add	partially secured of Part you need, fill	nd on Schedule G: Executory Co claims that are listed in Schedule it out, number the entries in the ite your name and case number ecured Claims	D: Creditors Who I boxes on the left. A	Hold Claims Sec	ured by Property.
	tors have priority	unsecured claim	s against you?			
		anoccarca ciann	o agamot you.			
Mo. Got ☐ Yes.	10 Part 2.					
claim. For ear show both pric more space is claim, list the	ch claim listed, ide prity and nonpriori s needed for priori other creditors in	entify what type of ty amounts. As mu ty unsecured claim Part 3.	reditor has more than one priority of claim it is. If a claim has both prior uch as possible, list the claims in a s, fill out the Continuation Page of instructions for this form in the ins	rity and nonpriority an Iphabetical order acc Part 1. If more than	nounts, list that coording to the cred	laim here and ditor's name. If
(,		Total claim	Priority amount	Nonpriority amount
2.1						
				-		
Priority Creditor's Nam	ie		Last 4 digits of account number			
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that an	nlv	
			Contingent	ioi onook an that ap	ρ.γ.	
			Unliquidated			
City	State	ZIP Code	Disputed			
Who incurred the			Type of PRIORITY unsecured cla	aim:		
☐ Debtor 1 only			☐ Domestic support obligations			
Debtor 2 only			Taxes and certain other debts		nent	
Debtor 1 and D		un ath a r	Claims for death or personal in	njury while you were		
ш	the debtors and a		intoxicated			
	claim is for a con	illiumity debt	Other. Specify			
Is the claim subjed No	CL TO OHSEL?					
Yes						

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Debtor 1 DeAndrea Ann	Anderson	Case number (if known)	
Part 2: List All of Yo	ur NONPRIORIT	Y Unsecured Claims	
Yes 4. List all of your nonpriorit	g to report in this part y unsecured claims	d claims against you? The Submit this form to the court with your other schedules. The in the alphabetical order of the creditor who holds each claim. The scured claim, list the creditor separately for each claim. For each claim listed	I, identify what
		cluded in Part 1. If more than one creditor holds a particular claim, list the oth unsecured claims, fill out the Continuation Page of Part 2.	ner creditors in
			Total claim
Avant Credit Nonpriority Creditor's Name 222 W Merchandise Mart Number Street		Last 4 digits of account number 1 8 0 1 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	<u>\$514.00</u>
Chicago City Star Who incurred the debt? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this claim is for a Is the claim subject to offset? No Yes	eck one. and another community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Payday Loan	
4.2 Citra Urgent Care Nonpriority Creditor's Name 5230 Las Virgenes Rd Suit Number Street	te 210	Last 4 digits of account number 8 9 3 0 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$263.00
Calabasas City Stat Who incurred the debt? Che Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at list the claim subject to offset? No Yes	te ZIP Code eck one. and another	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	

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Debtor 1 DeAndrea Ann Anderson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.3		\$1,071.00
Comerica Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Culver City CA 90230	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	ordan dara	
✓ No ☐ Yes		
4.4		\$400.00
Credit One Bank Correspondence Nonpriority Creditor's Name	Last 4 digits of account number 4 5 1 5	
PO Box 98873	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	☐ Unilquidated ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a concretion agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.5		\$25.00
CTRMA Progressive	Last 4 digits of account number 3 2 7 3	
Nonpriority Creditor's Name	When was the debt incurred?	
14050 Summit Dr #113A Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Austin TX 78728	Disputed	
City State ZIP Code	- Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Collection	
Is the claim subject to offset?	Concention	
No		
Yes		

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Debtor 1 DeAndrea Ann Anderson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$215.00
East Central SUD	Last 4 digits of account number 2 5 8 7	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 570 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
A distinct	Disputed	
Adkins TX 78101 City State ZIP Code	Type of NONDRIORITY upgequired eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.7		\$876.00
Envision Physician Servcies	Last 4 digits of account number 4 4 7 4	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 99082 Number Street	As of the date you file, the claim is: Check all that apply.	
Trumbol Guoci	_ Contingent	
	Unliquidated	
Las Vegas NV 89193	Disputed	
Las Vegas NV 89193 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
–	☑ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
✓ No □ Yes		
4.8		\$313.00
First Premier Bank	Last 4 digits of account number 9 0 9 0	
Nonpriority Creditor's Name 601 S Minnesota Ave	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Sioux Falls SD 57104	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
-	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No □ Yes		

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Debtor 1 DeAndrea Ann Anderson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$501.00
First Progress	Last 4 digits of account number 6 2 2 7	·
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 9053 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Johnson City TN 37615	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	orealt oura	
✓ No ☐ Yes		
4.10		\$348.00
Labcorp Attn Special Operations	Last 4 digits of account number 4 9 1 0	40.0.00
Nonpriority Creditor's Name	When was the debt incurred?	
1250 Chapel Hill Rd Number Street	As of the date you file, the claim is: Check all that apply.	
Trained Cross	_ Contingent	
	Unliquidated	
Burlington NC 27217	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
☑ No		
Yes		
4.11		\$22,786.00
Mechanics Bank Nonpriority Creditor's Name	Last 4 digits of account number1001_	
PO Box 25085	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Santa Ana CA 92799 City State ZIP Code	Town of NONDRIODITY was a sound a lating	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Repossession	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		

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After listing any entries on this page, number them sequentially from the previous page. 4.12 Medical City McKinney Nonpriority Creditor's Name PO Box 740728 Number Street City State Total claim State Total claim
Total clair
Medical City McKinney Nonpriority Creditor's Name PO Box 740728 Number Street Cincinnati. OH 45374 Disputed Last 4 digits of account number 4 4 7 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Cincinnati. OH 45374
Medical City McKinney Nonpriority Creditor's Name PO Box 740728 Number Street Cincinnati. OH 45374 Last 4 digits of account number 4 4 7 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
PO Box 740728 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Cincinnati. OH 45374 Disputed
Cincinnati. OH 45374
Cincinnati. OH 45374
City State ZIP Code Type of NONPRIORITY unsecured claim:
Who incurred the deht? Check one
☐ Student loans ☐ Debtor 1 only ☐ Obligations arising out of a separation agreement or divorce
Lipeptor 2 only that you did not report as priority claims
Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Other Charles
✓ Other. Specify
Is the claim subject to offset? Medical
✓ No Yes
4.13 \$40,728
NeInet Last 4 digits of account number <u>u n t s</u>
Nonpriority Creditor's Name When was the debt incurred?
PU BOX 82561
PO Box 82561 Number Street As of the date you file, the claim is: Check all that apply.
Number Street As of the date you file, the claim is: Check all that apply. Contingent
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Debtor 1 only As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Lincoln City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another. As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify
As of the date you file, the claim is: Check all that apply. Contingent
As of the date you file, the claim is: Check all that apply. Contingent
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.14 NTTA Last 4 digits of account number u n t s When was the debt incurred? When was the debt incurred?
Number Street Street Contingent Unliquidated Disputed Disputed
As of the date you file, the claim is: Check all that apply. Contingent
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Number Street
Number Street
Number Street
Number Street

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im
75.00
71.00
30.00

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Debtor 1 DeAndrea Ann Anderson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$207.00
Spring Creek Utility	Last 4 digits of account number 0 5 6 7	<u> </u>
Nonpriority Creditor's Name 2300 Leichester Dr	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Spring TX 77386 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Utility	
Is the claim subject to offset?	,	
☑ No ☐ Yes		
4.19		\$248.00
Texas Radiology Associates Nonpriority Creditor's Name	Last 4 digits of account number5 _ 7 _ 2 _ 3 _	
PO Box 631893	When was the debt incurred?	
Number Street	 As of the date you file, the claim is: Check all that apply. □ Contingent 	
	Unliquidated	
Cincinnati OH 45263	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? ✓ No		
✓ NO Yes		
4.20		\$248.00
Texas Radiology Associates Nonpriority Creditor's Name	Last 4 digits of account number 2 0 9 3	
PO Box 3368	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Indianapolia IN 46206	Disputed	
Indianapolis IN 46206 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
✓ No ☐ Yes		

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Debtor 1 DeAndrea Ann Anderson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	n sequentially from the	Total claim
4.21		\$131.00
TX Tag	Last 4 digits of account number 4 4 9 8	Ψ101.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 650749 Number Street	As of the date you file, the claim is: Check all that apply.	
Dallas TX 75265 0749	_ Contingent	
	☐ Unliquidated ☐ Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Toll Fees	
No No		
Yes		
4.22		\$200.00
	Last 4 digits of account number 2 F 7 2	\$600.00
Nonpriority Creditor's Name	_ Last 4 digits of account number <u>2</u> <u>5</u> <u>7</u> <u>3</u> When was the debt incurred?	
6745 FM 78 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Sueet	Contingent	
	Unliquidated	
San Antonio TX 78244	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.23		\$8,332.00
Vero Credit Nonpriority Creditor's Name	_ Last 4 digits of account number _ 0 _ 1 _ 0 _ 1	
2333 N Broadway	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
-	_	
Santa Ana CA 92706	Disputed	
Santa Ana CA 92706 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Repossession	
Is the claim subject to offset?		
✓ No ☐ Yes		
□ 103		

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Deptor 1	DeAndrea Ann And	erson	Case number (if known)
Part 3:	List Others to B	e Notified Ab	out a Debt That You Already Listed
For exa credito debts t	ample, if a collection agor or in Parts 1 or 2, then I	gency is trying t ist the collectio 1 or 2, list the a	otified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. o collect from you for a debt you owe to someone else, list the original n agency here. Similarly, if you have more than one creditor for any of the dditional creditors here. If you do not have additional parties to be notified for omit this page.
	ancial Services		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 3075 E Imi	perial Hwy Suite 200)	Line 4.19 of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Street		Part 2: Creditors with Nonpriority Unsecured Claims
Brea City	CA State	92821 ZIP Code	Last 4 digits of account number
Credit Systems International Inc		nc	On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 10	188		Line 4.16 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number S	Street		Part 2: Creditors with Nonpriority Unsecured Claims
Arlington	TX	76004	— Last 4 digits of account number
City	State	ZIP Code	

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Debtor 1	DeAndrea Ann Anderson	Case number (if known)	
Part 4:	Add the Amounts for Each Type of Unsecured Claim		

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		7		
				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom runt r	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$40,728.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+\$51,045.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$91,773.00

Fill in this inf	ormation to ide								
Debtor 1	DeAndrea First Name	Ann Middle Name	Anderson Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States Ba	United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS								
Case number (if known)					Check if this is an amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this in	nformation to i	dentify your case	:		
Debtor 1	DeAndrea First Name	Ann Middle Name	Anderson Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name	_	
United States B	ankruptcy Court fo	r the: NORTHERN D	ISTRICT OF TEXAS	_	
Case number (if known)				Check if this is an amended filing	
Official Forn	n 106H				
Schedule F	l: Your Code	ebtors			12/1
two married peo needed, copy the	ple are filing toge e Additional Page	ther, both are equally , fill it out, and numbe	responsible for supplying or the entries in the boxes	Be as complete and accurate as possible. If g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.	
1. Do you have	e any codebtors?	(If you are filing a jo	int case, do not list either sp	pouse as a codebtor.)	

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

lacksquare Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

✓ No ☐ Yes

Yes

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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	ill in this inform	ation to identify	y your case:				
	Debtor 1	DeAndrea	Ann	Anderso	n		
		First Name	Middle Name	Last Name		Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			An amended filing
	United States Bankru	uptcy Court for the	NORTHERN	DISTRICT OF TI	EXAS		A supplement showing postpetition
	Case number	aproy Court to: ano.					chapter 13 income as of the following date:
	(if known)						MM / DD / YYYY
_	fficial Form 10						
S	chedule Ι: Υοι	ur Income					12/15
re: ind ab yo	sponsible for supply clude information ab out your spouse. If ur name and case no	ing correct information out your spouse. In more space is nee	ation. If you are If you are separ ded, attach a se Answer every q	married and not ated and your spo parate sheet to th	filing jointl ouse is not	y, and your : filing with y	l Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your employ	yment					
	information. If you have more the	aan ono		Debtor 1			Debtor 2 or non-filing spouse
	job, attach a separate page	ate page Emplo	Employment status	☑ Employed			Employed
	with information aboadditional employe	rs.		☐ Not employe			■ Not employed
	Include next time a	Occup	ation	Community M	anager		-
	Include part-time, s or self-employed w	- ul -	yer's name	Asset Liuire			_
	Occupation may ind student or homema applies.	Empio	yer's address	15601 Dallas F Number Street	Pkwy #200)	Number Street
				Addison City	TX State	75001 Zip Code	City State Zip Code
		How Id	ong employed th	ere? <u>2/20/23</u>		_	
	Part 2: Give Do	etails About Mo	onthly Incom	9			
Es	timate monthly inco	me as of the date y	ou file this form		ing to repo	t for any line	, write \$0 in the space. Include your
	n-filing spouse unless	,		or combine the inf	rmation fo	r all ammlayay	re for that narrow on the lines helpy. If
	u need more space, a			er, combine the init	ormation to	ali employei	rs for that person on the lines below. If
					For	Debtor 1	For Debtor 2 or non-filing spouse
2.		s wages, salary, ar . If not paid monthly			2	\$7,002.97	
3.	Estimate and list r	monthly overtime p	ay.		3. +	\$0.00	
4.	Calculate gross in	come. Add line 2	+ line 3.		4.	\$7,002.97	

Debt	or 1 DeAndrea Ann Anderson		Case nun	nber (if know	/n)		_
			For Debtor 1	For Debto			
	Copy line 4 here	4.	\$7,002.97			_	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$545.13				
	5b. Mandatory contributions for retirement plans	5b.	\$0.00				
	5c. Voluntary contributions for retirement plans	5c.	\$0.00				
	5d. Required repayments of retirement fund loans	5d.	\$0.00				
	5e. Insurance	5e.	\$0.00				
	5f. Domestic support obligations	5f.	\$0.00				
	5g. Union dues	5g.	\$0.00				
	5h. Other deductions. Specify: Life Insurance	_ 5h.•	+\$2.99				
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$548.12				
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$6,454.85				
	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00				
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00				
	8e. Social Security	8e.	\$0.00				
	8f. Other government assistance that you regularly receive			-			
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00				
	8g. Pension or retirement income	– 8g.	\$0.00				
	8h. Other monthly income. Specify:	8h.	+ \$0.00				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	– 9.	\$0.00				
					=	г	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$6,454.85	+		=	\$6,454.85
11.	State all other regular contributions to the expenses that you list in S	Sched	ule J.				
	Include contributions from an unmarried partner, members of your housel friends or relatives.	hold, y	our dependents, you	r roommates	s, and oth	ier	
	Do not include any amounts already included in lines 2-10 or amounts that	at are ı	not available to pay e	expenses list	ed in Sch	nedi	ule J.
	Specify:				_ 11.	+	\$0.00
	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie				12.		\$6,454.85
	if it applies.	o allu	Octiani Statistical IIII	omatioH,			Combined monthly income
13.	Do you expect an increase or decrease within the year after you file to	this fo	rm?				
	✓ No. None.						
	Yes. Explain:						

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F	ill in this inforn	nation to ide	ntify	your case:			Che	eck if this	, io:	
	Debtor 1	DeAndrea		Ann	Ande	rson			ended filing	
		First Name		Middle Name	Last Na			A supp	lement showing	
	Debtor 2 (Spouse, if filing)	First Name		Middle Name	Last Na	ame		•	r 13 expenses ang date:	as of the
	United States Bankı		the [.]	NORTHERN DI	STRICT O	F TFXAS		NANA / D	D /2000/	
	Case number	ruptoy Court for		NORTH ENTRE	5111101 0	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		MM / D	D / YYYY	
	(if known)									
0	fficial Form 10	<u>)6J</u>								
S	chedule J: Yo	our Expens	ses							12/15
nai	rrect information. I	f more space is	need Answe	led, attach anothe er every question.	er sheet to	ling together, both a this form. On the to				
1.	Is this a joint cas									
2.	✓ No. Go to lin ✓ Yes. Does C	e 2. Debtor 2 live in a	st file (s for Separate House	ehold o	f Debtor	2.	
۷.	Do you have dep		₹ Y	lo 'es. Fill out this inf		Dependent's relat Debtor 1 or Debto		p to	Dependent's age	Does dependent live with you?
	Debtor 2.	for each dependent			Daughter			17	□ No	
	Do not state the denames.	ependents'				Son			12	─ [☑ Yes □ No ─ [☑ Yes
						Son			22	No Ves
										□ No □ Yes
										□ No □ □ Yes
3.	Do your expense expenses of peopyourself and you	ple other than		✓ No ☐ Yes						□ Tes
Ŀ	Part 2: Estima	ate Your Ong	going	g Monthly Exp	enses					
to	•	of a date after	the b		•	are using this form a supplemental Sche			•	
	clude expenses paid ch assistance and I		•		•	ı know the value of cial Form 106l.)			Your expen	ses
4.	The rental or hon Include first mortg								4	\$2,000.00
	If not included in	line 4:								
	4a. Real estate ta	axes							4a	
	4b. Property, hor	neowner's, or re	nter's	insurance					4b	
	4c. Home mainte	enance, repair, a	nd up	keep expenses					4c	\$150.00
	4d. Homeowner's	s association or	condo	minium dues					4d	

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Deb	tor 1 DeAndrea Ann Anderson Case	number (if known)	
		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$365.00
	6b. Water, sewer, garbage collection	6b	\$130.00
	6c. Telephone, cell phone, Internet, satellite, and cable services (See continuation sheet(s) for continuation sheet(s) fo	details) 6c.	\$443.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7	\$1,400.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$200.00
10.	Personal care products and services	10.	\$250.00
11.	Medical and dental expenses	11	\$200.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$420.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$300.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$185.00
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		_
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify: Help to Family	19.	\$350.00

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Deb	tor 1	DeAndrea Ann Anderson	Case number (if known)	
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	r. Specify:	21. +	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$6,393.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	J-2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$6,393.00
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$6,454.85
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$6,393.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$61.85
24.	Do yo	ou expect an increase or decrease in your expenses within the year after	you file this form?	
		xample, do you expect to finish paying for your car loan within the year or do yent to increase or decrease because of a modification to the terms of your mo	. ,	
		No.		
		Yes. Explain here: None.		
		TOTAL .		

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Debtor 1	DeAndrea Ann Anderson	Case number (if known)	
6c. Telep	phone, cell phone, Internet, satellite, and cable services (details):		
Cell	Phone		\$260.00
Cable	e/Satellite		\$60.00
Inter	net		\$75.00
Secu	ırity		\$48.00
		Total:	\$443.00

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Debtor 1 DeAndrea Ann Anderson First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS Case number (if known)	Fill in this inf	ormation to id	dentify your case	:
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS Case number	Debtor 1			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS Case number				
	, , ,			
				_

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$37,853.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$37,853.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$40,537.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$91,773.00
	Your total liabilities	\$132,310.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$6,454.85
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$6,393.00

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Deb	tor 1	DeAndrea Ann Anderson Case	number (if known)			
P	art 4:	Answer These Questions for Administrative and Statistical R	ecords			
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	_	No. You have nothing to report on this part of the form. Check this box and submit the	nis form to the court with your other schedules.			
7.	What	kind of debt do you have?				
	<u> </u>	Your debts are primarily consumer debts. Consumer debts are those "incurred by amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical p	. , , , , , , , , , , , , , , , , , , ,			
		Your debts are not primarily consumer debts. You have nothing to report on this his form to the court with your other schedules.	part of the form. Check this box and submit			
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$6,062.79					
9.	Сору	the following special categories of claims from Part 4, line 6 of <i>Schedule E/F:</i>				
			Total claim			
	From	Part 4 on Schedule E/F, copy the following:				
	9a. [Domestic support obligations. (Copy line 6a.)	\$0.00			
	9b. T	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00			
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00			
	9d. S	Student loans. (Copy line 6f.)	\$40,728.00			
		Obligations arising out of a separation agreement or divorce that you did not report a priority claims. (Copy line 6g.)	\$0.00			

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$40,728.00

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		dentify your case			
Debtor 1	DeAndrea First Name	Ann Middle Name	Anderson Last Name	-	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	the: NORTHERN D	ISTRICT OF TEXAS	_	
Case number (if known)					Check if this is a amended filing
Official Form	106Dec				

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is l	NOT an attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have true and correct.	read the summary and schedules filed with this declaration and that they are
X /s/ DeAndrea Ann Anderson	_ x
DeAndrea Ann Anderson, Debtor 1	Signature of Debtor 2
Date <u>03/29/2023</u>	Date
MM / DD / YYYY	MM / DD / YYYY

12/15

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Fill in this in	nformation to id	entify your	case:				
Debtor 1	DeAndrea	Ann		Anderson			
	First Name	Middle Nam	е	Last Name			
Debtor 2 (Spouse, if filing	g) First Name	Middle Nam	e	Last Name			
United States F	Sankruptcy Court for	the: NORTHE	RN DIST	RICT OF T	EXAS		
Case number	Sankruptcy Court for	ule. INDICTIL	INIT DIO	ikioi oi ii			
(if known)					_	_	if this is an ed filing
Official Forr	m 107						9
		Affaira far	ن دام دا د	iduala Ei	ling for Bonkrur	atau.	0.4/22
Statement	oi Financiai A	Allairs ioi	maiv	iduais Fi	ling for Bankrup	лсу	04/22
correct informat your name and o	tion. If more space case number (if kno	is needed, atta own). Answer	ach a sep every qu	earate sheet t	ing together, both are e o this form. On the top nere You Lived Befo	of any additional pa	
Tart II.	ive Details Abo	at rour mar	itai Otai	tus and Wi	iere rou Eiveu Ben	016	
-	ır current marital st	tatus?					
☐ Married ✓ Not mar	ried						
_	last 3 years, have y	ou lived anvw	here othe	er than where	vou live now?		
	idot o youro, navo y	ou iivou uiiy ii	nore oure	Titali Wilere	you live now.		
Yes. Lis	st all of the places yo	ou lived in the la	ast 3 year	s. Do not incl	ude where you live now.		
Debtor 1	l:		Dates lived t	Debtor 1 here	Debtor 2:		Dates Debtor 2 lived there
					Same as Debtor	1	Same as Debtor
3119 Gi	ilbert		From	11/2021			From
Number	Street		— — То	7/2022	Number Street		 To
					_		_
Conver	se TX	78109	_				
City	State	e ZIP Code			City	State ZIP Code	
Debtor 1	l:		Dates lived t	Debtor 1 here	Debtor 2:		Dates Debtor 2 lived there
					Same as Debtor	1	☐ Same as Debtor 1
16944 V	Wren Hill St		From	8/2020			From
Number	Street		— — То	11/2021	Number Street		 To
				-	_		_
Conroe	TX	77305	_				
City	State	e ZIP Code	_		City	State ZIP Code	
3. Within the I	act & voare did	Lover live with	a eneve	o or local ca	ivalent in a community	nronorty ototo or to	rritory?
			-		uivalent in a community Idaho, Louisiana, Nevad		-
					raarro, zoarolarra, rioraa		
Washington	, and Wisconsin.)				,, , , , , , , , , , , , , ,	,	, ,

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Debtor 1		DeAndrea Ann Anderson			Case number (if known)			
Р	art 2:	Explain the Sources of Y	our Income					
4.	Fill in th	have any income from employne total amount of income you rece e filing a joint case and you have Fill in the details.	ived from all jobs and all bu	sinesses, including par	t-time activities.	lendar years?		
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions		
		ry 1 of the current year until filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$9,262.00	☐ Wages, commissions, bonuses, tips☐ Operating a business			
For last calendar year: (January 1 to December 31,		•	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$58,445.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business			
For the calendar year before that: (January 1 to December 31,		-	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$64,303.00	☐ Wages, commissions, bonuses, tips☐ Operating a business			
5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.							
	List each source and the gross income from each source separately. Do not include income that you listed in line 4.							
	✓ No Yes. Fill in the details.							

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Debtor 1	_	DeAndrea Ann Ande	erson			Case number (if know	wn)
Part 3		List Certain Payn	nents You Ma	ade Before \	You Filed for Ba	nkruptcy	
6. Are	eithe	er Debtor 1's or Debto	r 2's debts prima	arily consume	r debts?		
□ ¹	No.	Neither Debtor 1 nor	-	-			d in 11 U.S.C. § 101(8) as
		During the 90 days be	efore you filed for	r bankruptcy, di	d you pay any credi	tor a total of \$7,575*	or more?
		☐ No. Go to line 7.					
		total amoun	t you paid that cr	editor. Do not i	nclude payments fo	nore in one or more pr domestic support of attorney for this bank	bligations, such as
		* Subject to adjustme	ent on 4/01/25 an	d every 3 years	after that for cases	filed on or after the o	late of adjustment.
☑ ′	Yes.	Debtor 1 or Debtor 2	2 or both have p	rimarily consu	mer debts.		
		During the 90 days be	efore you filed for	r bankruptcy, di	d you pay any credi	tor a total of \$600 or	more?
		☐ No. Go to line 7.					
		creditor. Do	not include payr	ments for dome		re and the total amou ons, such as child su case. Amount you still owe	
Exeter F		nce Corp		_	\$521.00	\$19,898.00	_
PO Box		008		monthly			☑ Car ☐ Credit card
Number	Stree	et		_			Loan repayment
rving		TX	75016	_			☐ Suppliers or vendors ☐ Other
City		State	ZIP Code	_			
Insid corpo agen	lers i orationt, inc	nclude your relatives; a	any general partn n officer, director, ess you operate a	ers; relatives of person in cont	f any general partne rol, or owner of 20%	rs; partnerships of wl or more of their votil	who was an insider? hich you are a general partner; ng securities; and any managing s for domestic support obligations
☐ <i>'</i>		List all payments to ar	n insider.				

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Del	otor 1	DeAndrea Ann Ander	son		Cas	se number (if	known)		
8.		1 year before you filed for	r bankruptcy, d	lid you make any paymen	ts or trans	sfer any prop	erty on acco	unt of a del	ot that
	Include	payments on debts guara	nteed or cosigne	ed by an insider.					
	☑ No □ Yes	s. List all payments that be	enefited an inside	er.					
P	art 4:	Identify Legal Acti	ons, Reposs	essions, and Foreclo	sures				
9.	Within List all	1 year before you filed fo	r bankruptcy, w rsonal injury cas	vere you a party in any la es, small claims actions, di	vsuit, coι			-	-
	□ No ☑ Yes	s. Fill in the details.							
Cas	se title		Nature of the	case	Court o	r agency		Statu	s of the case
Elij	jah Ded	erick Anderson	Divorce Acti	on		Dederick An	derson		 Pending
					Court Nar	ne			☐ On appeal
0 -					Number	Street			
Cas	se numbe	er 4107-51603-2023							Concluded
					City		State ZII	P Code	
10.	seized, Check	1 year before you filed for or levied? all that apply and fill in the . Go to line 11.		vas any of your property i	epossess	sed, foreclos	ed, garnished	d, attached,	
		s. Fill in the information be	elow.						
	_			Describe the property			Date	Value	of the property
On	e Main	Financial Bankruptcy		2015 Dodge Charger			2/24/23		
Cre	ditor's Nam	ne		-					
_	Box 32	251 reet		Explain what happened					
				✓ Property was reposs					
				Property was foreclo					
	ansville		47731	Property was garnish Property was attache	ed.	or lovied			
City		State	ZIP Code	_					
11.		-		did any creditor, includir a payment because you	-		nstitution, se	t off any	
	✓ No ☐ Yes	s. Fill in the details.							
12.		1 year before you filed foors, a court-appointed rec		vas any of your property i an, or another official?	n the pos	session of ar	n assignee fo	r the benef	t of
	✓ No ☐ Yes								

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Debtor 1		DeAndrea Ann Anderson	Case number (if known)	
Pa	art 5:	List Certain Gifts and Contributions		
13.	Within 2	years before you filed for bankruptcy, did you give any gifts with a	total value of more than \$600 per person?	
	✓ No ☐ Yes	. Fill in the details for each gift.		
14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?				
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.		
Pa	art 6:	List Certain Losses		
15.		year before you filed for bankruptcy or since you filed for bankrupt saster, or gambling?	cy, did you lose anything because of theft, fire,	
	✓ No ☐ Yes	. Fill in the details.		
Pa	art 7:	List Certain Payments or Transfers		
16.		year before you filed for bankruptcy, did you or anyone else acting you consulted about seeking bankruptcy or preparing a bankruptcy		
	-	any attorneys, bankruptcy petition preparers, or credit counseling agencie		
	✓ No ☐ Yes	. Fill in the details.		
17.		year before you filed for bankruptcy, did you or anyone else acting who promised to help you deal with your creditors or to make paym		
	Do not i	nclude any payment or transfer that you listed on line 16.		
	✓ No ☐ Yes	. Fill in the details.		
18.		years before you filed for bankruptcy, did you sell, trade, or otherw y transferred in the ordinary course of your business or financial aff		
		both outright transfers and transfers made as security (such as granting onclude gifts and transfers that you have already listed on this statement.	of a security interest or mortgage on your property).	
	✓ No ☐ Yes	. Fill in the details.		
19.		0 years before you filed for bankruptcy, did you transfer any proper a beneficiary? (These are often called asset-protection devices.)	ty to a self-settled trust or similar device of which	
	✓ No ☐ Yes	. Fill in the details.		

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Deb	otor 1	DeAndrea Ann Anderson	Case number (if known)
Р	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.	benefit, Include	l year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred? checking, savings, money market, or other financial accounts; certificates of the country o	
	☑ No	pension funds, cooperatives, associations, and other financial institutions. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc ırities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	☑ No	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
Р	art 9:	Identify Property You Hold or Control for Someone Else	
23.	-	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed from, are storing for,
	☑ No □ Yes	. Fill in the details.	
Ρ	art 10:	Give Details About Environmental Information	
For	the purp	ose of Part 10, the following definitions apply:	
ı	hazardou	nental law means any federal, state, or local statute or regulation conc s or toxic substance, wastes, or material into the air, land, soil, surfac statutes or regulations controlling the cleanup of these substances, w	e water, groundwater, or other medium,
		ns any location, facility, or property as defined under any environment or used to own, operate, or utilize it, including disposal sites.	al law, whether you now own, operate, or
		<i>is material</i> means anything an environmental law defines as a hazardo e, hazardous material, pollutant, contaminant, or similar item.	ous waste, hazardous substance, toxic
Rep	ort all no	otices, releases, and proceedings that you know about, regardless of w	hen they occurred.
24.	Has any law?	governmental unit notified you that you may be liable or potentially lia	able under or in violation of an environmental
	✓ No ☐ Yes	. Fill in the details.	
25.		ou notified any governmental unit of any release of hazardous material	?
	✓ No ☐ Yes	. Fill in the details.	

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Deb	tor 1	DeAndrea Ann Anderson	Case number (if known)			
26.	Have y	u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and				
	✓ No ☐ Yes	s. Fill in the details.				
Pa	Part 11: Give Details About Your Business or Connections to Any Business					
27.	Within busine	4 years before you filed for bankruptcy, did you own a business or hav ss?	e any of the following connections to any			
		A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnershi A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation				
	سخا	None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each business.				
28.		2 years before you filed for bankruptcy, did you give a financial statem ncial institutions, creditors, or other parties.	ent to anyone about your business? Include			
	□ No □ Yes	s. Fill in the details below.				

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Debtor 1	DeAndrea Ann Anderson		Case number (if known)
Part 12	: Sign Below		
that the an	swers are true and correct. I unde	rstand that making a false stater uptcy case can result in fines up	ments, and I declare under penalty of perjury ment, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years,
	Andrea Ann Anderson ea Ann Anderson, Debtor 1 03/29/2023	XSignature of Debtor 2	
Did you at	tach additional pages to Your State	ment of Financial Affairs for Indi	ividuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes			
Did you pa	ay or agree to pay someone who is	not an attorney to help you fill o	ut bankruptcy forms?
✓ No ☐ Yes. N	lame of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inf	Fill in this information to identify your case:				
Debtor 1	DeAndrea	Ann	Anderson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS					
Case number					
(if known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1.	For any cred fill in the info	Property (Official Form 106D),		
	Identify the	creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's name:	Aarons Inc	Surrender the property. Retain the property and redeem it	□ No . ☑ Yes

Retain the property and enter into a Description of furniture Reaffirmation Agreement. property Retain the property and [explain]: securing debt: Debt will be reaffirmed for fair market value. Creditor's **Drive Casa** Surrender the property. No $\overline{\mathbf{Q}}$ name: П Retain the property and redeem it. Yes Retain the property and enter into a Description of 2012 Mitsubishi Outlander (approx. Reaffirmation Agreement. property 116,000 miles) Retain the property and [explain]: securing debt: Creditor's **Exeter Finance Corp** Surrender the property. No name: Retain the property and redeem it. Yes Retain the property and enter into a $\overline{\mathbf{Q}}$ Description of 2015 Jeep Cherokee (approx. 99,000 Reaffirmation Agreement. property

securing debt:

Retain the property and [explain]:

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Debtor 1	DeAndrea Ann Anderson	Case number (if known)				
Part 2:	List Your Unexpired Personal Property Leases					
fill in the in		Executory Contracts and Unexpired Leases (Official Form 106G), ases are leases that are still in effect; the lease period has not a trustee does not assume it. 11 U.S.C. § 365(p)(2).				
Descr	ibe your unexpired personal property leases	Will this lease be assumed?				
None	ı.					

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Debtor 1	DeAndrea Ann Anderson			Case number (if known)					
Part 3:	Sign Below								
-	penalty of perjury, I declare that I hall all property that is subject to an un		-	y property of my estate that secures a debt and					
	Andrea Ann Anderson ea Ann Anderson. Debtor 1	x	Signature of Debtor 2						
Date <u>0</u>	13/29/2023 //M / DD / YYYY		Date MM / DD / YYYY						

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE: **DeAndrea Ann Anderson** CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	۱r	ne a	bove	nam	ed l	Debtor	hereby	verifies	that	the	attached	list o	of credito	ors is	true	and	correct	to t	he b	oest (ot h	ııs/her
know	/led	ge.																				

Date 3/29/2023	Signature /s/ DeAndrea Ann Anderson DeAndrea Ann Anderson
Date	Signature

Aarons Inc 111 S Central Expwy McKinney, TX 75070

Attorney General State of Texas Collections Div Bankruptcy PO Box 12017 OAG CSC MC 38 Austin TX 78711 2017

Avant Credit 222 W Merchandise Mart Chicago, IL 60654

Citra Urgent Care 5230 Las Virgenes Rd Suite 210 Calabasas, CA 91302

CMRE Financial Services 3075 E Imperial Hwy Suite 200 Brea, CA 92821

Comerica Bank 6700 S Centinela Ave Culver City, CA 90230

Credit One Bank Correspondence PO Box 98873 Las Vegas, NV 89193

Credit Systems International Inc PO Box 1088 Arlington, TX 76004

CTRMA Progressive 14050 Summit Dr #113A Austin, TX 78728 Drive Casa 11844 E Northwest Hwy Dallas, TX 75218

East Central SUD PO Box 570 Adkins, TX 78101

Envision Physician Servcies PO Box 99082 Las Vegas, NV 89193

Exeter Finance Corp PO Box 166008 Irving, TX 75016

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

First Progress PO Box 9053 Johnson City, TN 37615

IRS CIO
PO Box 7346
Philadelphia PA 19101 7346

Labcorp Attn Special Operations 1250 Chapel Hill Rd Burlington, NC 27217

Mechanics Bank PO Box 25085 Santa Ana, CA 92799 Medical City McKinney PO Box 740728 Cincinnati. OH 45374

Nelnet PO Box 82561 Lincoln, NE 68501

NTTA 5900 W Plano Pkwy Plano, TX 75093

One Main Financial Bankruptcy PO Box 3251 Evansville, IN 47731

ProPath Associates PO Box 678174 Dalla, TX 75267 8174

Speedy Cash 7330 W 33rd St N Suite 118 Wichita, KS 67205

Spring Creek Utility 2300 Leichester Dr Spring, TX 77386

State Comptroller of Public Accounts 111 E 17th St Austin, TX 78774-0100

Texas Radiology Associates PO Box 631893 Cincinnati, OH 45263 Texas Radiology Associates PO Box 3368
Indianapolis, IN 46206

Texas Workforce Commission TEC Bldg, Tax Dept Austin, TX 78778

TX Tag
PO Box 650749
Dallas TX 75265 0749

U-Haul 6745 FM 78 San Antonio, TX 78244

United States Attorney 1100 Commerce, Suite 300 Dallas, TX 75242

US Attorney General Department of Justice 950 Pennsylvania Ave NW Washington DC 20530-0001

US Attorney General
Department of Justice
Main Justice Building
10th and Constitution Ave NW
Washington DC 20530-0001

Vero Credit 2333 N Broadway Santa Ana, CA 92706

Veterans Administration 801 Vermont Ave NW Washington, DC 20420 William T Neary US Trustee 1100 Commerce St Room 976 Dallas TX 75242